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MEMORANDUM

To: Superintendents of Local and Intermediate School Districts, Administrators of Public School Academies and Building Principals

From: Pat Nichols, Deputy Director
Curriculum Development and School Health Programs

Date: October 18, 1999

Subject: Management of Students with Asthma in the School Setting

There has been a significant increase in the number of students with asthma in our schools. In fact, asthma is the leading serious chronic illness of children in the United States. It is also the number one cause of school absenteeism due to a chronic condition, leading to an estimated average of 7.3 school days missed annually. In order to decrease the amount of time these students are absent from school because of acute episodes of asthma, the following recommendations are offered by the Michigan Asthma Steering Committee of the Michigan Department of Community Health, based on Asthma Management Guidelines of the National Heart, Lung, and Blood Institute:

- ☐ Many children with asthma are taught to carry their own medication (example: metered-dose inhalers) and to self-administer as part of their doctor-prescribed treatment regimen. **Schools need to honor the parental request and doctor's written instructions that allow a child to carry and self-medicate.** Please see memorandum dated 11/19/96 concerning Medications in School for further recommendations.
- ☐ Support and encourage pro-active communication with parents of asthmatic children. The successful management of asthma is a partnership between home, school, and the child's health care provider. A sample Asthma Management Plan is attached that can be sent home for completion by the asthmatic child's parents and doctor on an **annual basis** or more often if the child's medications change. This form is also available on the Michigan Department of Education's web site at:
<http://www.state.mi.us/mde>
- ☐ If needed, school administrators may have direct communication with the child's health care provider in order to resolve individual problems that may arise because of the child's asthma.
- ☐ **Schools need to provide opportunities for staff to learn more about asthma and allergies.**
 - **All staff should know the early warning signs of an acute asthma episode, and should be aware of emergency procedures** and contacts in case a child needs medical assistance. Please copy the attached flyer, "Signs of an Asthma Emergency," to distribute to all your staff and post on bulletin boards around your school.

- Staff should be aware that chalk dust, animals in the classroom, strong odors (perfumes and paints), cleaning agents, molds, and numerous other substances may be asthma triggers for some children.
- Staff with asthmatic students should know the signs of possible side effects of asthma medications, and also be aware which side effects are serious enough to warrant reporting to the child's parents or health care provider.

Qualified professionals in asthma management from several organizations in Michigan can be contacted for staff in-service sessions on asthma - see enclosed listing. This information is also available on the Michigan Department of Education's web site at <http://www.state.mi.us/mde>

- ☐ Environmental pollutants are often triggers for acute episodes of asthma. Extensive building repairs or cleaning should be scheduled for long vacations or during summer months to avoid exposing children to fumes, dust, or other irritants. Routine cleaning and maintenance of the heating/cooling and air filtration system is important for reducing amounts of dust and mold in the schools.
- ☐ Physical education teachers, playground aides, and teachers need to know that **exercise can induce acute episodes for many students with asthma.** Exercise in cold, dry air and activities that require extended running appear to trigger asthma more often than other forms of exercise.

Often the child's doctor will prescribe medication to be taken prior to gym class or other physical exertion to help avoid an acute asthma episode. This preventive medicine enables most students with exercise-induced asthma to participate in any sport they choose. **The child's doctor should describe the use of preventive medication in the child's asthma management plan, which needs to be reviewed by the physical education teachers** at the beginning of each school year, or if the child's plan changes.

- ☐ It is important for school staff who are responsible for students during physical activity to be aware of those students who have exercise-induced asthma. **A child with exercise-induced asthma should be allowed to stop any physical activity if they are having difficulty.**

If you have questions, please contact Pat Nichols, Michigan Department of Education, School Health Programs, (517) 373-7247.

Attachments